MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/563895 APPLICANT(S)

FILING DATE
5 MAR 2005

\mathbf{C}			

	ACT	AL ED	AF	TER	AF	TER				A YOU	DESTR.		
		AS FILED 1"		1 ⁴ AMENDMENT		NDMENT		AS FILED		AR"	TER NDMENT	AFTER	
1	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	Di
2		7				 	<u>51</u> 52						
3		7					53						<u> </u>
4		/					54						
5							55						-
7							56						-
8							57						-
9		'					58						
10		7					59 60						
11	·						61						
12		/					62						
13							63					- -	
14 15		-/, 					64						
16							65						
7							66						
18					 		67 68						
9							69						
20							70						
1							71	4-446				1000	
22							72						
4							73						
5					<u></u>		74 75						
6			-			-	76						
7							77						
8		·					78						
9							79						
1							80						
2							81 82						
3							83						
4							84						
5							85						
7							86						
8							87						
9							88 89						
0							90						
1							91			-			
$\frac{2}{2}$							92						
3							93						
5							94						
6							95		-				
7							96 · 97						
8							98						
9							99						
0							100		-				
TAL D.	/	1		1		1	TOTAL						
ral .				T		▼	IND.		▼ []	▼ [4
EP.	14_	-		-		-	TOTAL DEP.		(= [(- [(
TAL IMS	15	3.0				4	TOTAL CLAIMS				16	7	
		Constitution of the last		-O. Washington	136	A PARTY NAMED IN	COAUIS		.S. DEPARTA	<u> </u>			